

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		1/5	1/29/01
FORMALITY REVIEW	TZ	JC947	2/15/01
RESPONSE FORMALITY REVIEW	jph	1020	5-24-01

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
☐ N Non-elected
☐ I Interference
☐ A Appeal
☐ O Objected

Claim	Final	Original	Date
1			10/01
2			04/02
3			05/02
4			11/02
5			05/03
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If more than 150 claims or 10 actions
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